PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2880

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, davance orders and notification of maintenance fees will be mailed to the current correspondence saldress as indicated unless corrected below or directed otherwise in Block 1, by 60, specifying a new correspondence address, and/or (6) indicating a separace "FEE ADDRESS" or

indicated unless correct maintenance fee notific	ted below or directed ot	herwise in Block I, by (a) specifying a new corre 	spondence address	and/or (b) indicating a sep	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
23643	7590 09/13	3/2006	nav			
BARNES & THORNBURG LLP 11 SOUTH MERIDIAN INDIANAPOLIS, IN 46204				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (5/1) 273-2885, on the date indicated below.		
				:		(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/697,627 10/30/2003		Andrew W. Marsden	den 20341-72631 7341			
TITLE OF INVENTION	N: MONITOR FOR SEN	SING AND TRANSMIT	TING SOUNDS IN A BA	BY'S VICINITY		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/13/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS			
LIEU, JULIE	BICHNGOC	2612	340-539150			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the pages of the 12 and 12 and 13 and 14 and 14 and 14 and 15 a						& Thornburg LL
	oondence address (or Cha B/122) attached.	inge of Correspondence	(1) the names of up to or agents OR, alternati		attorneys	u incinati
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number Is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
			THE PATENT (print or ty			
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assign assignment.	ec is identified below, the d	ocument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Cosco Management, Inc. Wilmington, Delaware						
Please check the appropr	riate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Co	rporation or other private gro	oup entity Government
4a. The following fee(s)	are submitted:	41	. Payment of Fee(s): (Plea	sc first reapply ar	y previously paid issue fee	shown above)
Issue Fee						
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies ☐ Department by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 10-0435. (enclose an extra copy of this form						
			overpayment, to Depo	sit Account Numbe	r 10-0435 (enclose a	n extra copy of this form).
5. Change in Entity Sta	tus (from status indicated s SMALL ENTITY statu		D			
			from anyone other than t	ger claiming SMAL	L ENTITY status. See 37 CI stered attorney or agent; or th	K 1.2/(g)(2).
interest as shown by the	records of the United Sta	tes Patent and Trademark	Office.		stored amorney or again, or the	e using nee or other party in
Authorized Signature	19da	rd 4. Keze	<u></u>	Date1	November 14, 200	6
Typed or printed nam		A. Rezek		Registration N		
This collection of inform an application. Confident submitting the completee this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 1 application form to the ons for reducing this bur irginia 22313-1450. DO 13-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (in is required to obtain or r 1.14. This collection is est depending upon the indiv chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 m idual case. Any cour, U.S. Patent and THIS ADDRESS	ne public which is to file (and ninutes to complete, includin mments on the amount of tin frademark Office, U.S. Depa . SEND TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rument of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number